FIFTH OFF-SITE CORRECTIVE ACTION PLAN ASSESSMENT

of

HAMILTON CORRECTIONAL INSTITUTION

for the

Physical and Mental Health Survey Conducted May 21-23, 2019

CMA STAFF

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I. Overview

On May 21-23, 2019, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Hamilton Correctional Institution (HAMCI). The survey report was distributed on June 17, 2019. In July 2019, HAMCI submitted, and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the HAMCI survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than 90 days. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

Cap #	Request Date for Monitoring Documents	Cap Assessment Date	On-site or Off-site	Total # of Survey Findings	Total # of Open Findings	Total # of Closed Findings
1	10/22/19	January 29-30, 2020	On-site	34	21	13
2	6/26/20	August 27, 2020	Off-site	21	12	9
3	3/23/21	April 6, 2021	Off-site	12	6	6
4	9/8/21	October 4, 2021	Off-site	6	2	4
5	3/21/22	April 5, 2022	Off-site	2	0	2

Summary of CAP Assessments for Hamilton Correctional Institution

I. Physical Health Assessment Summary

A. Main Unit

All physical health findings are closed.

B. Annex Unit

The CAP closure files revealed sufficient evidence to determine that 1 of the 1 physical health findings were corrected. All physical health findings will close.

Finding	Closed	Open: Evaluation of records indicated an acceptable level of compliance was not met	Open: No episodes were available for review	Open: Institutional monitoring was inadequate	Open: Institutional monitoring indicated compliance was not met
Infirmary Care PH-8: In 4 of 12 applicable records, the infirmary nursing discharge note did not contain all required components.	X				

II. Mental Health Assessment Summary

A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 1 of the 1 mental health findings were corrected. All mental health findings are closed.

Finding	Closed	Open: Evaluation of records indicated an acceptable level of compliance was not met	Open: No episodes were available for review	Open: Institutional monitoring was inadequate	Open: Institutional monitoring indicated compliance was not met
Mental Health Systems MH-11: The institution does not offer a variety of therapeutic groups to meet the needs of the population as required.	Х				

B. Annex Unit

All mental health findings are closed.

IV. Conclusion

All findings as a result of the May 2019 survey are closed and no further action is required on this CAP. The CMA appreciates the efforts to improve services and documentation at this institution and continues to encourage ongoing quality improvement activities to ensure that the proper provision of health care services is maintained.